Victim Witness Assistance Program (VWAP)

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PERS-00J
Dept. of the Navy VWAP Coordinator

The Navy's Victim Witness Assistance Program – Bridging the Gap

- Understand the needs of victims, assistance available to victims, and the role of victim advocates.
- Interrelationship of FAP, SAVI & VWAP.
- VWAP bridges the gap.
- Resources for victims & witnesses: FAP, SAVI, Chaplain, Fleet & Family Service Center, Medical, NCIS & RLSO/NLSO.
- Balance compassion & issue-spotting.

VWAP References

- 42 USC § 10601 et seq.
- 18 USC §§ 1512 – 1514
- DOD INST 1030.2
- DOD INST 1342.24
- DOD DIR 1030.01
- SECNAVINST 5800.11B
- OPNAVINST 5800.7
- OPNAVINST 1750.3
- BUPERSINST 5800.3A
- DD FORM 2701, 2702, 2703, 2704, 2705, 2706

Victims' Rights and Restitution Act (1990)

- To be treated with fairness and respect
- To be reasonably protected from the accused
- To be notified of court proceedings
- To attend public court sessions
  - Unless determined testimony would be materially affected if witness to other testimony
- To have advisory role in decisions involving prosecutorial discretion**
- To be informed about case disposition

DD 2701: Initial Information for Victims &

increased concern for their personal safety and that of their family, trouble concentrating on the job, difficulty handling everyday problems, feeling overwhelmed, and thinking of the crime repeatedly.

Some or all of these behaviors may occur and will ease with time. They are normal reactions but you may wish to see a counselor. State compensation funds may be available to reimburse you for such counseling. The Victim/Witness Assistance Responsible Official will have further information.

Your Rights As A Victim.

As a Federal crime victim, you have the following rights:

- The right to be treated with fairness and with respect for your dignity and privacy;
- The right to be reasonably protected from the accused offender;
- The right to be notified of court proceedings;
- The right to be present at all public court proceedings related to the offense, unless the court determines that your testimony would be materially affected if you as the victim heard other testimony at trial;
- The right to confer with the attorney for the government in the case;
- The right to available restitution;
- The right to information about the conviction, sentencing, imprisonment, and release of the offender.

If You Need Additional Assistance:

In regard to the status of the investigation, contact the investigator below:

_____
(Name)

_____
(Telephone Number)

In regard to other assistance available, contact the command Victim/Witness Responsible Official, or the person identified below:

_____
(Name)

_____
(Telephone Number)

In regard to the prosecution, contact the legal office below:

_____
(Name)

_____
(Telephone Number)

In regard to compensation for medical or other expenses, contact the state office for Crime Victim Compensation:

_____
(Name)

_____
(Telephone Number)

Please notify these offices of any changes of address or telephone number.

For further information on crime issues, see the DoD Victim and Witness Assistance Council web page at:
http://dod.mil/vwac

DEPARTMENT OF DEFENSE

INITIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME

DD FORM 2701, MAY 2004 Previous edition is obsolete.

DOD Compensation Programs

- **Transitional Compensation** - Title 10 USC, Sec 1059; DD Form 2698; DoD Inst 1342.24
- If Sponsor is court-martialed or administratively separated for family member abuse:
  - Payments for 12 – 36 months to families ($1,067/mo for spouse; $265/mo per child) (child only rates: $452, $324.50, $282, $252)
  - Full medical benefits + Commissary & Exchange privileges for family members
- Cannot live with or remarry sponsor or remarry -- benefits terminate
- DFAS sends recipient a Certificate of Eligibility each year – payments suspended without timely response

- **Retirement Benefits** - Title 10 USC, Sec 1408(h)
- Sponsor loses already earned retirement (20 year minimum) through court-martial sentence for family member abuse
- Spouse married to sponsor at least 10 years of his 20(+) years of service
- Divorce court awards spouse portion of SM's retirement
- Medical benefits for 20-20-20 are lifelong; 15 year marriage allows one year medical benefits (divorce ends medical)
- Can elect Transitional Compensation while waiting for divorce court action and approval of retirement benefits, but it is subject to recoupment

DOD Compensation Programs cont'd

- **Travel and Transportation of Dependents** – JFTR U5240 Dependent Travel Under Unusual/Emergency Circumstances
- (F) Incident to a court-martial sentence/administrative Discharge Under Other than Honorable conditions
- Dependents entitled to PCS travel/transportation
- HHG shipment if sponsor signs approval or court order awarding spouse division of property. JFTR U5370H (pages U5D 49 – 50)
- Authorization letter for dependents travel & transportation
- Court-martial: Convening Authority. LOA is built using BUPERSINST 7040.6
- Administrative Separation: Command or separation authority. Can use LOA from sponsor's separation orders

- **Navy POC:** CNIC Millington Detachment (N911B2)
- Karen Roksandic (901) 874-4361 DSN: 882-4361; karen.roksandic@navy.mil
- Jaynice Taylor (901) 874-4332 DSN: 882-4332; jaynice.taylor@navy.mil

Other Compensation Programs

DOJ Office for Victims of Crime (OVC)

http://www.ojp.usdoj.gov/ovc/welcovc/welcome.html

National Assoc. of Crime Victim Compensation Boards

http://www.nacvcb.org/

CA Victim Compensation & Government Claims Board

http://www.boc.ca.gov/

DD 2702: Court-Martial Information for Victims &

Sentencing.

In this phase, the judge or members (jury) decide the appropriate types and amount of punishment. The Trial Counsel may call witnesses to show aggravating factors concerning the offenses. The defense may call witnesses to show the offense may be less serious than otherwise indicated. You may be asked to return to the witness stand and testify as to how the crime has affected you. This may include the emotional, physical and financial suffering you experienced.

Punishment.

The court-martial ends when the judge reads the sentence to the accused. Normally, any confinement ordered begins at the time the sentence is announced. Other parts of the sentence, such as forfeitures of pay and reduction in rank, take effect after the "convening authority", usually a senior officer, takes "action" on the case. This generally occurs within two to three months, but can take longer in more complex cases.

If the accused is sentenced to prison, you have additional rights to notification of any changes in the inmate's status. These will be explained to you by the Trial Counsel or a designated representative.

If the offender is convicted or discharged for abusing you or your children, you may be eligible for "transitional compensation" benefits. Contact the Trial Counsel for an application (DD Form 2707) and for further information.

Your Participation.

You may choose to participate in the trial at several stages. You may ask to be:

- Notified of and be present at all public court proceedings;
- Consulted on pre-trial confinement of accused and release of accused from pre-trial confinement;
- Contacted about the proposed dismissal of any and all charges;
- Consulted on decision not to prosecute;
- Contacted regarding the proposed terms of any negotiated plea;
- Consulted on proposed terms of any pre-trial agreement;
- Notified of the acceptance of a guilty plea; to present to the court evidence on sentencing;
- Informed about the conviction, sentencing, and imprisonment of the accused.

Points of Contact:
Victim/Witness Responsible Official

_____
(Name)

_____
(Telephone Number)

Trial Counsel

_____
(Name)

_____
(Telephone Number)

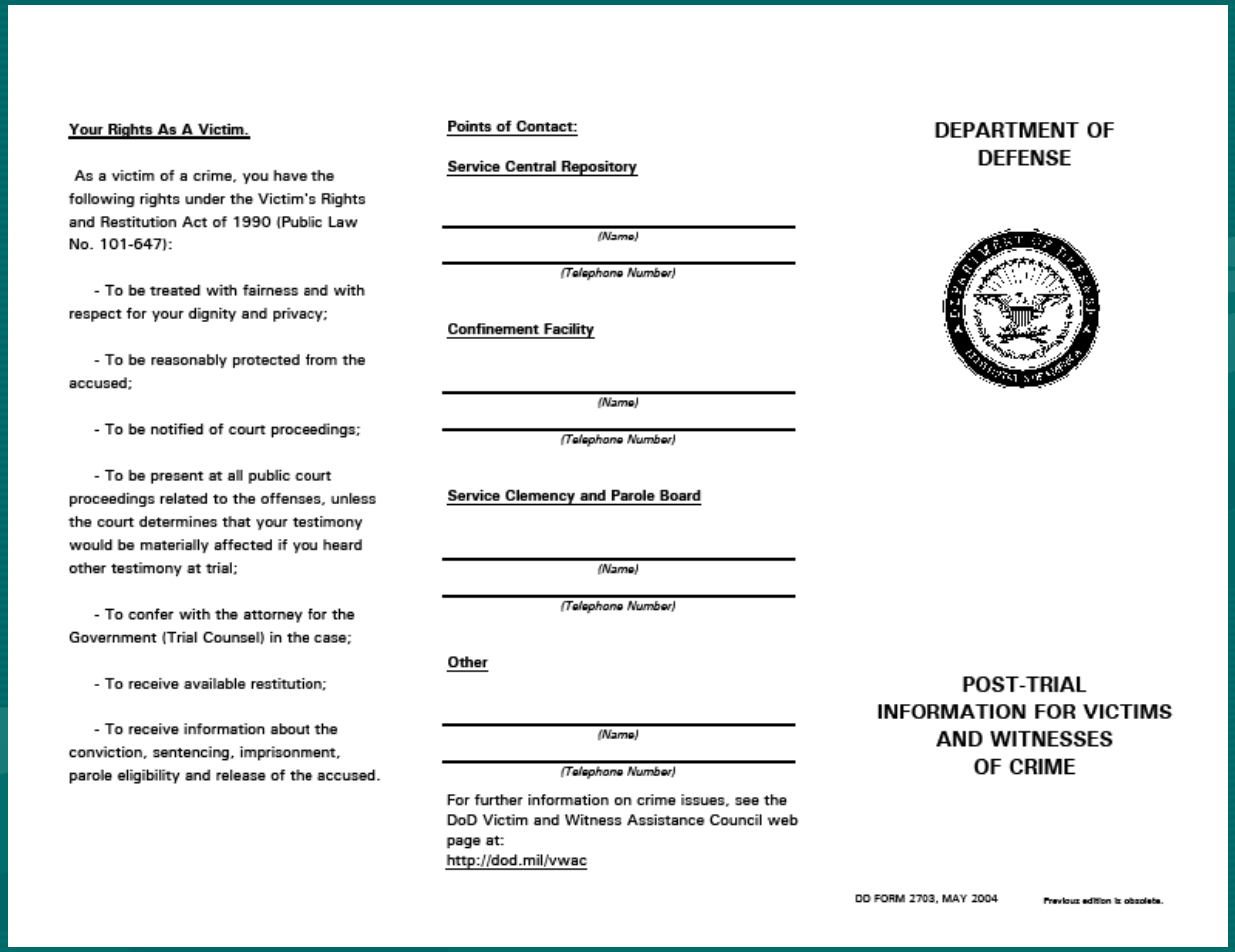
For further information on crime issues, see the DoD Victim and Witness Assistance Council web page at:
http://dod.mil/vwac

DEPARTMENT OF DEFENSE

COURT-MARTIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME

DD FORM 2702, MAY 2004 Previous edition is obsolete.

DD 2703: Post-Trial Information for Victims &



Your Rights As A Victim.

As a victim of a crime, you have the following rights under the Victim's Rights and Restitution Act of 1990 (Public Law No. 101-647):

- To be treated with fairness and with respect for your dignity and privacy;

- To be reasonably protected from the accused;

- To be notified of court proceedings;

- To be present at all public court proceedings related to the offenses, unless the court determines that your testimony would be materially affected if you heard other testimony at trial;

- To confer with the attorney for the Government (Trial Counsel) in the case;

- To receive available restitution;

- To receive information about the conviction, sentencing, imprisonment, parole eligibility and release of the accused.

Points of Contact:

Service Central Repository

(Name)

(Telephone Number)

Confinement Facility

(Name)

(Telephone Number)

Service Clemency and Parole Board

(Name)

(Telephone Number)

Other

(Name)

(Telephone Number)

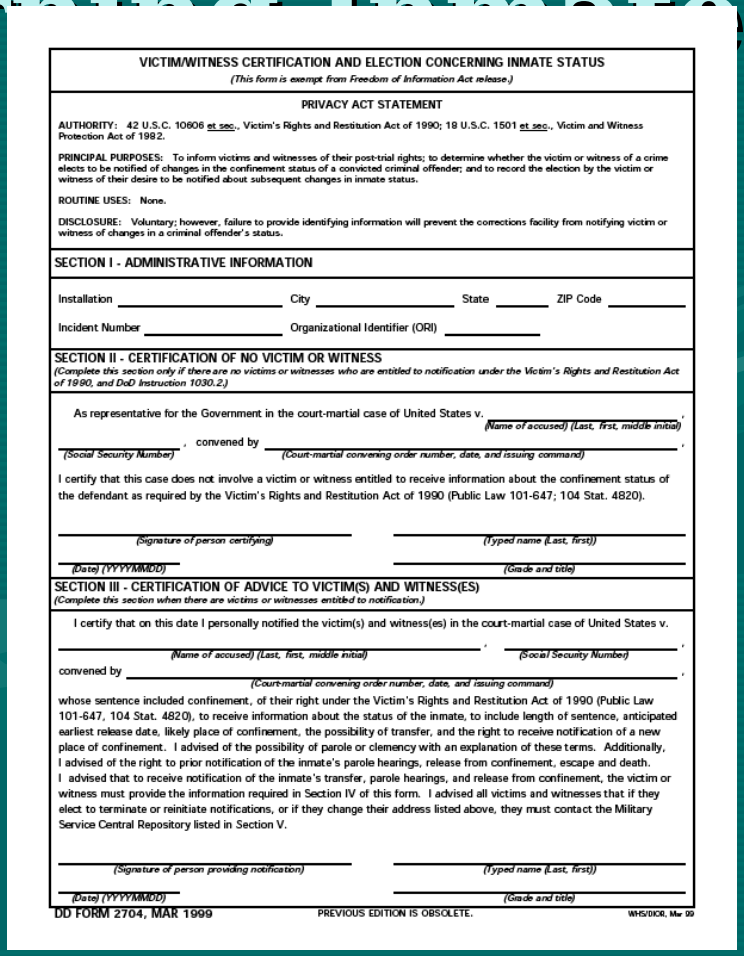
For further information on crime issues, see the DoD Victim and Witness Assistance Council web page at:
http://dod.mil/vwac

DEPARTMENT OF DEFENSE

POST-TRIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME

DD FORM 2703, MAY 2004 Previous edition is obsolete.

DD 2704: Victim/Witness Certification & Election Concerning Inmate Status



VICTIM/WITNESS CERTIFICATION AND ELECTION CONCERNING INMATE STATUS

(This form is exempt from Freedom of Information Act release.)

PRIVACY ACT STATEMENT

AUTHORITY: 42 U.S.C. 10606 et sec., Victim's Rights and Restitution Act of 1990; 18 U.S.C. 1501 et sec., Victim and Witness Protection Act of 1982.

PRINCIPAL PURPOSES: To inform victims and witnesses of their post-trial rights; to determine whether the victim or witness of a crime elects to be notified of changes in the confinement status of a convicted criminal offender; and to record the election by the victim or witness of their desire to be notified about subsequent changes in inmate status.

ROUTINE USES: None.

DISCLOSURE: Voluntary; however, failure to provide identifying information will prevent the corrections facility from notifying victim or witness of changes in a criminal offender's status.

SECTION I - ADMINISTRATIVE INFORMATION

Installation _____ City _____ State _____ ZIP Code _____

Incident Number _____ Organizational Identifier (ORI) _____

SECTION II - CERTIFICATION OF NO VICTIM OR WITNESS

(Complete this section only if there are no victims or witnesses who are entitled to notification under the Victim's Rights and Restitution Act of 1990, and DoD Instruction 1030.2.)

As representative for the Government in the court-martial case of United States v. _____, *(Name of accused) (Last, first, middle initial)*

_____, *(Social Security Number)* convened by _____ *(Court-martial convening order number, date, and issuing command)*,

I certify that this case does not involve a victim or witness entitled to receive information about the confinement status of the defendant as required by the Victim's Rights and Restitution Act of 1990 (Public Law 101-647; 104 Stat. 4820).

_____ *(Signature of person certifying)* _____ *(Typed name (Last, first))*

_____ *(Date) (YYYYMMDD)* _____ *(Grade and title)*

SECTION III - CERTIFICATION OF ADVICE TO VICTIM(S) AND WITNESS(ES)

(Complete this section when there are victims or witnesses entitled to notification.)

I certify that on this date I personally notified the victim(s) and witness(es) in the court-martial case of United States v.

_____, *(Name of accused) (Last, first, middle initial)* _____, *(Social Security Number)*,

convened by _____ *(Court-martial convening order number, date, and issuing command)*,

whose sentence included confinement, of their right under the Victim's Rights and Restitution Act of 1990 (Public Law 101-647, 104 Stat. 4820), to receive information about the status of the inmate, to include length of sentence, anticipated earliest release date, likely place of confinement, the possibility of transfer, and the right to receive notification of a new place of confinement. I advised of the possibility of parole or clemency with an explanation of these terms. Additionally, I advised of the right to prior notification of the inmate's parole hearings, release from confinement, escape and death. I advised that to receive notification of the inmate's transfer, parole hearings, and release from confinement, the victim or witness must provide the information required in Section IV of this form. I advised all victims and witnesses that if they elect to terminate or reinitiate notifications, or if they change their address listed above, they must contact the Military Service Central Repository listed in Section V.

_____ *(Signature of person providing notification)* _____ *(Typed name (Last, first))*

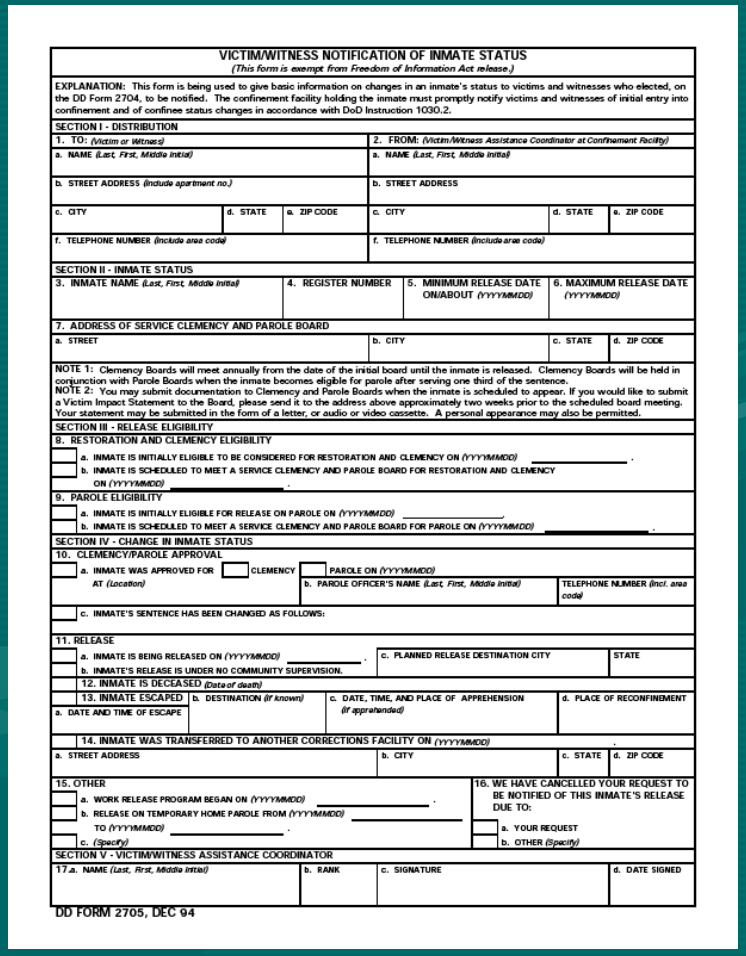
_____ *(Date) (YYYYMMDD)* _____ *(Grade and title)*

DD FORM 2704, MAR 1999 PREVIOUS EDITION IS OBSOLETE. WHS/DIOR, Mar 99

Guidance for DD 2704

- Trial Counsel provides DD2704 to the brig upon confinement for all adjudged prisoners.
- DODI 1030.2 provides for notification of inmate status for victims and appropriate witnesses – those that fear harm by the offender.
- DO NOT list every court-martial witness or list everyone you *think* would want to know of a certain inmate's status.

DD 2705: Victim/Witness Notification of Inmate



VICTIM/WITNESS NOTIFICATION OF INMATE STATUS

(This form is exempt from Freedom of Information Act release.)

EXPLANATION: This form is being used to give basic information on changes in an inmate's status to victims and witnesses who elected, on the DD Form 2704, to be notified. The confinement facility holding the inmate must promptly notify victims and witnesses of initial entry into confinement and of confinee status changes in accordance with DoD Instruction 1030.2.

SECTION I - DISTRIBUTION

1. TO: *(Victim or Witness)*			2. FROM: *(Victim/Witness Assistance Coordinator at Confinement Facility)*		
a. NAME *(Last, First, Middle Initial)*			a. NAME *(Last, First, Middle Initial)*		
b. STREET ADDRESS *(Include apartment no.)*			b. STREET ADDRESS		
c. CITY	d. STATE	e. ZIP CODE	c. CITY	d. STATE	e. ZIP CODE
f. TELEPHONE NUMBER *(Include area code)*			f. TELEPHONE NUMBER *(Include area code)*		

SECTION II - INMATE STATUS

3. INMATE NAME *(Last, First, Middle Initial)*	4. REGISTER NUMBER	5. MINIMUM RELEASE DATE ON/ABOUT *(YYYYMMDD)*	6. MAXIMUM RELEASE DATE *(YYYYMMDD)*

7. ADDRESS OF SERVICE CLEMENCY AND PAROLE BOARD			
a. STREET	b. CITY	c. STATE	d. ZIP CODE

NOTE 1: Clemency Boards will meet annually from the date of the initial board until the inmate is released. Clemency Boards will be held in conjunction with Parole Boards when the inmate becomes eligible for parole after serving one third of the sentence.
NOTE 2: You may submit documentation to Clemency and Parole Boards when the inmate is scheduled to appear. If you would like to submit a Victim Impact Statement to the Board, please send it to the address above approximately two weeks prior to the scheduled board meeting. Your statement may be submitted in the form of a letter, or audio or video cassette. A personal appearance may also be permitted.

SECTION III - RELEASE ELIGIBILITY

8. RESTORATION AND CLEMENCY ELIGIBILITY

- ☐ a. INMATE IS INITIALLY ELIGIBLE TO BE CONSIDERED FOR RESTORATION AND CLEMENCY ON *(YYYYMMDD)* _____.
- ☐ b. INMATE IS SCHEDULED TO MEET A SERVICE CLEMENCY AND PAROLE BOARD FOR RESTORATION AND CLEMENCY ON *(YYYYMMDD)* _____.

9. PAROLE ELIGIBILITY

- ☐ a. INMATE IS INITIALLY ELIGIBLE FOR RELEASE ON PAROLE ON *(YYYYMMDD)* _____.
- ☐ b. INMATE IS SCHEDULED TO MEET A SERVICE CLEMENCY AND PAROLE BOARD FOR PAROLE ON *(YYYYMMDD)* _____.

SECTION IV - CHANGE IN INMATE STATUS

10. CLEMENCY/PAROLE APPROVAL

☐ a. INMATE WAS APPROVED FOR ☐ CLEMENCY ☐ PAROLE ON *(YYYYMMDD)* AT *(Location)*	b. PAROLE OFFICER'S NAME *(Last, First, Middle Initial)*	TELEPHONE NUMBER *(Incl. area code)*
☐ c. INMATE'S SENTENCE HAS BEEN CHANGED AS FOLLOWS:		

11. RELEASE

☐ a. INMATE IS BEING RELEASED ON *(YYYYMMDD)* _____.	c. PLANNED RELEASE DESTINATION CITY	STATE
☐ b. INMATE'S RELEASE IS UNDER NO COMMUNITY SUPERVISION.		

☐ 12. INMATE IS DECEASED *(Date of death)*

☐ 13. INMATE ESCAPED a. DATE AND TIME OF ESCAPE	b. DESTINATION *(If known)*	c. DATE, TIME, AND PLACE OF APPREHENSION *(If apprehended)*	d. PLACE OF RECONFINEMENT

☐ 14. INMATE WAS TRANSFERRED TO ANOTHER CORRECTIONS FACILITY ON *(YYYYMMDD)* _____.

a. STREET ADDRESS	b. CITY	c. STATE	d. ZIP CODE

15. OTHER

- ☐ a. WORK RELEASE PROGRAM BEGAN ON *(YYYYMMDD)* _____.
- ☐ b. RELEASE ON TEMPORARY HOME PAROLE FROM *(YYYYMMDD)* _____ TO *(YYYYMMDD)* _____.
- ☐ c. *(Specify)*

16. WE HAVE CANCELLED YOUR REQUEST TO BE NOTIFIED OF THIS INMATE'S RELEASE DUE TO:

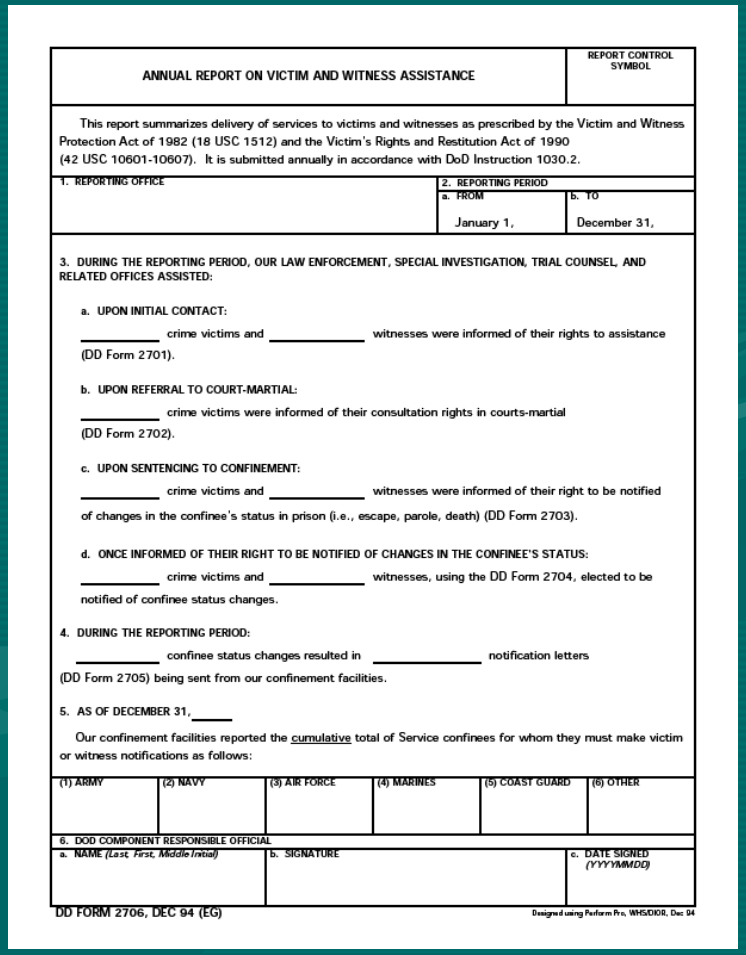
- ☐ a. YOUR REQUEST
- ☐ b. OTHER *(Specify)*

SECTION V - VICTIM/WITNESS ASSISTANCE COORDINATOR

17.a. NAME *(Last, First, Middle Initial)*	b. RANK	c. SIGNATURE	d. DATE SIGNED

DD FORM 2705, DEC 94

DD 2706: Annual Report on Victim & Witness



ANNUAL REPORT ON VICTIM AND WITNESS ASSISTANCE

REPORT CONTROL SYMBOL

This report summarizes delivery of services to victims and witnesses as prescribed by the Victim and Witness Protection Act of 1982 (18 USC 1512) and the Victim's Rights and Restitution Act of 1990 (42 USC 10601-10607). It is submitted annually in accordance with DoD Instruction 1030.2.

1. REPORTING OFFICE

2. REPORTING PERIOD

a. FROM: January 1,

b. TO: December 31,

3. DURING THE REPORTING PERIOD, OUR LAW ENFORCEMENT, SPECIAL INVESTIGATION, TRIAL COUNSEL, AND RELATED OFFICES ASSISTED:

a. UPON INITIAL CONTACT:

_____ crime victims and _____ witnesses were informed of their rights to assistance (DD Form 2701).

b. UPON REFERRAL TO COURT-MARTIAL:

_____ crime victims were informed of their consultation rights in courts-martial (DD Form 2702).

c. UPON SENTENCING TO CONFINEMENT:

_____ crime victims and _____ witnesses were informed of their right to be notified of changes in the confinee's status in prison (i.e., escape, parole, death) (DD Form 2703).

d. ONCE INFORMED OF THEIR RIGHT TO BE NOTIFIED OF CHANGES IN THE CONFINEE'S STATUS:

_____ crime victims and _____ witnesses, using the DD Form 2704, elected to be notified of confinee status changes.

4. DURING THE REPORTING PERIOD:

_____ confinee status changes resulted in _____ notification letters (DD Form 2705) being sent from our confinement facilities.

5. AS OF DECEMBER 31, _____

Our confinement facilities reported the cumulative total of Service confinees for whom they must make victim or witness notifications as follows:

(1) ARMY	(2) NAVY	(3) AIR FORCE	(4) MARINES	(5) COAST GUARD	(6) OTHER

6. DOD COMPONENT RESPONSIBLE OFFICIAL

a. NAME *(Last, First, Middle Initial)*	b. SIGNATURE	c. DATE SIGNED *(YYYYMMDD)*

DD FORM 2706, DEC 94 (EG)

Designed using Perform Pro, WHS/DIOR, Dec 94

Annual VWAP Report

- Due to PERS-00J by 31 January.
- Preferably submitted via Region or TYCOM.
- Do not submit to both Region/TYCOM and PERS-00J to avoid double-counting.
- Do not include brig numbers.
- Due 15 March to SECDEF via SECNAV.